

Dennis M. Slate
Attorney at Law
112 East Forrest Lane
Deer Park, Texas 77536
281-476-9447 • 281-476-5811
WILL QUESTIONNAIRE

1. Your full name (first, middle, last), address and telephone number.

2. Are you over the age of 18 years? Yes _____

No _____ 3. Are you married? Yes _____ No _____

4. **If yes to 3 above**, full name of spouse (first, middle, last). _____

5. The person named in 4 above is your Husband _____ Wife _____

6. If you have been married before, provide names of former spouse(s), date(s) marriage ended; how it ended; i.e., death, divorce, etc. _____

7. How many children do you have who are your natural children? _____

8. Full name (first, middle, last) of each person referenced in 7 above together with their relationship to you and where they currently reside; i.e., John Edward Doe, son, Dallas, Texas. a.

_____ b.

_____ c.

_____ d.

_____ e.

9. Are there any persons who are not your natural children whom you have adopted? Yes _____ No _____

10. **If the answer to 9, above, is yes**, list the full name, relationship to you and current area of residence for each; i.e., Sally Jane Roe, stepdaughter, currently resides in Deer Park,

TX _____

11. Are there any persons who are NOT your natural children, whom you have NOT formally adopted whom you wish to have considered as children under this Will.

Yes _____ No _____ 12. **If your response to 11, above, is yes.** then list the full name (first, middle, last), relationship to you, current area of residence; i.e., Jane Marie Doe; unadopted stepdaughter; Los Angeles, California. _____

13. Please indicate which of the persons listed in responses to 8, 10, 12 to whom you are referring when you refer to my "child" or "children". _____

14. Do you have any person or persons whom you wish to make a special point of **excluding** from your Will. For example, if you have a child or stepchild who might normally be considered a person who would be a beneficiary of your body that you wish to exclude, it is normally better to make a point of excluding that person so that it does not appear that they were excluded by accident. Do such persons exist?

Yes _____ No _____ 15. **If you answered Yes to 14,** please provide full name (first, middle, last), their relationship to you and their current area of residence. Example: Jack Blacksheep, stepson, Leavenworth, Kansas. _____

16. Do you have any deceased children? Yes _____ No _____

17. **If the answer to 16, above, is yes,** please list their full name (first, middle, last), exact relationship, approximate date of death. _____

18. List in order of preference the persons whom you would like to have serve as your executor (executrix). List at least two, but no more than three. List full name (first, middle, last), their relationship to you; current area of residence. Note: From a practical point of view, it is much easier for the executor if they are in the same area where you will be residing at the time of your death.

19. Do you wish for your spouse to be the ONLY beneficiary under your will? Yes _____ No _____

20. Answer this question if and only if you answered "no" to Inquiry No. 19, above. Please list the order of persons whom you wish to be beneficiaries under your Will and the portion of your estate that you wish for each to receive.

21. In the event that one or more of the beneficiaries identified in Question 19 or 20, above, should predecease you, what disposition do you want for the property that would have gone to such beneficiary, had they not predeceased you?

22. Is the value of your estate excluding retirement plans and/or insurance policies in excess of \$675,000.00? Yes _____ No _____

If yes we need to discuss possible tax consequences and/or estate planning needs. If no, the size of your estate will not exceed the current allowable deduction and based upon that fact ALONE, probably will not incur tax liability.23. If you have minor children, whom, if anyone, would you like to designate as

guardian of your children?Name, Relationship, Address

24. If a child(ren) is a beneficiary under your Will, what age would you like for them to obtain before their inheritance is turned over to them (i.e., 18, 25, 35, etc.)

_____25. Whom do you wish to serve as trustee of any trust created by this Will?Name, Relationship, Address

_____26. Do you wish to allow your trustee to invade the body of the trust to pay for extraordinary needs or education of the beneficiary?

Yes_____ No _____27. Do you have any

special gifts that you wish to make to any particular person or entity? (Example: my mother's gold locket to my daughter, Susie.) **If yes:**

A. Beneficiary One:1. Description of property given:

_____2. Name of person receiving special devise _____3. Relationship _____

_____B. Beneficiary Two:1. Description of property given:

_____2. Name of person receiving special devise _____3. Relationship _____

_____C. Beneficiary Three: 1. Description of property given:

_____2. Name of person receiving special devise _____3. Relationship _____

_____28. Please provide any other comments which you believe will be useful in expressing your testamentary wishes.

29. If you wish to sign a Living Will, Durable Power of Attorney or Durable Power of Attorney for Health Care, please indicate by your initials in front of each which of these documents, if any, that you wish to execute.

_____ A. Living Will (Directive to Physicians) _____ B.
Durable Power of Attorney1. Name, address and telephone number of person whom you wish to give authority to make business decisions for you in the event of your incapacity. _____

_____ 2. Name, address and telephone number of an alternate person, if any, whom you wish to give authority to make business decisions for you in the event of your incapacity.

_____ C. Power of Attorney for Health Care1. Name, address and telephone number of person whom you wish to give authority to make health care decisions on your behalf in the event of your lack of competency to do so. _____

_____ 2. Name, address and telephone number of an alternate person whom you wish to give authority to make health care decisions on your behalf in the event of your lack of competency to do so. _____
